Department of Health Services Toxic Substances Control Division State of California—Health and Welfare Agency Form Approved OMB No 2050—0039 (Expires 9-30-88) Sacramento, California Please print or type (Form designed for use on elite (12-pitch typewriter) Manifost 2 Page 1 1. Generator's US EPA ID No information in the shaded areas UNIFORM HAZARDOUS D | Q Q Q is not required by Federal law. C| A| D| 9| 8| 1| 3| 8| 8| 8| 8| 7 WASTE MANIFEST State Manifest Document Number Generator's Name and Mailing Address 7507 8 PUTZMEISTER INC. - THOMSEN DIVISION B State Generato 18601 South Main St., Gardena, CA 90248 Generator's Phone (905083 C. State Transporter's ID US EPA ID Number Transporter 1 Company Name D. Transporter's Phone 213) 949-0668 DI 918111618161214 REPTERBILT CHEMICALS. INC State Transporter's ID Transporter 2 Company Name Transporter's Phone G. State Facility's ID US EPA ID Number 9 Designated Facility Name and Site Address CIADIO1412121 OMEGA RECOVERY SERVICES H. Facility's Phone 12504 E. Whittier Blvd. 698-099 (213) WX 1 CLAIDIOL412121415101011 Whittier, CA 90602 12 Containers 13. Total Waste No. Quantity Unit 11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Type No State 214 WASTE, FLAMMABLE LIQUID N.O.S. UN1993 EPA/Other D001 State R EPA/Other State 0 R **EPA/Other** State EPA/Other K. Handling Codes for Wastes Listed Above a. 1 b. Additional Descriptions for Materials Listed Above 01 c. d. WASTE WASH THINNER 15 Special Handling histructions and Additional Information USE GLOVES & GOGGLES GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good taith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford Month Day Year Printed Typed Name Transporter 1 Acknowledgement of Receipt of Materials Printed Typed Name RICHARD SENTENO 18 Transporter 2 Acknowledgement of Receipt of Materials Day Signature Printed Typed Namin 19 Discrepancy indication Space 0 26. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Month Day Signature Printed Typed Name INSTRUCTIONS ON THE BACK Water ISBY SENDS THIS COPY TO DIOPS WITHIN 30 DHS 8022 A (1 87) EPA 8700--22 (Rev. 9-86) Previous editions are obsolete

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONS: CENTER 1-800-424-8802, WITHIN CALIFORNIA CALL 1-800-852-7550

To P.O. Box 3000, Sopramento, CA 75810